







2700 First Indiana Plaza 135 N rth Pennsylvania Street Indianap Iis, Indiana 46204

## PATENTAPPLICATION

Applicant:

Eckstein et al.

Serial No.:

10/085,966

Filing Date:

February 28, 2002

Title:

HYDRAULIC CONTROL APPARATUS

FOR A HOSPITAL BED

Group:

3754

Examiner:

Keasel, Eric S.

Attorney Docket No.:

8266-0823

Box Non-Fee Amendment COMMISSIONER FOR PATENTS WASHINGTON, D.C. 20231

Dear Sir:

Transmitted herewith is a response in the above-identified application:

The fee has been calculated as shown below:

	/
	,
	,
Cortificate Under 37 C.E.R.	1 Q(a)

I hereby certify that this paper or fee is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231.

n <u>December 13 ,2</u>

D. Cwiklinski

FAX RECEIVED

DEC 2 6 2002

**GROUP 3700** 

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	NUMBER EXTRA	RATE	FEE	
TOTAL CLAIMS (37 C.F.R. 1.16(c))	22	19	3	\$18	\$54	
INDEPENDENT CLAIMS (37 C.F.R. 1.16(b))	4	4	0	\$84	\$0	
If applicant has small entity status under 37 C.F.R 1.9 and 1.27, then divide total fee by 2, and enter amount here.  SMALL ENTITY TOTAL					\$54	
TOTAL FEE FOR ADDITIONAL CLAIMS					\$54	
An Extension of Time for month(s) is hereby requested under 37 C.F.R. 1.136(a). The required fee for filing this extension is: Information Disclosure Statement						
TOTAL FEE FOR THIS AMENDMENT					\$54.00	

CT AIME AC AMENDED

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of any overpayment, to Bose McKinney & Evans LLP's Deposit Account No. 02-3223. A duplicate copy of this sheet is enclosed.

A check in the amount of \$54, to cover the total fee for this amendment is attached.

Attorney of Record

Printed Name: Ryan C. Barker

Registration No.: 47,405